



CAMP HO MITA KODA 2010 STAFF & VOLUNTEER APPLICATION



Please complete this application in its entirety. Completed applications should be returned by mail to: Camp Ho Mita Koda, c/o Camp Manager, 3601 S. Green Rd., Suite 100, Cleveland, OH 44122 with the following materials:

- Copies of certifications
- Voluntary disclosure statement
- Two completed professional reference forms

Applications without reference letters and/or copies of certifications will be considered incomplete and will not be processed. Early application is recommended; positions will remain open until filled. Please direct questions to the Camp Manager at 216-591-0800.

I. APPLICANT INFORMATION

Date of application ___/___/___

Name: _____ Social Security# _____ - _____ - _____

E-Mail: _____ @ _____ Birth date (optional) ___/___/___

Permanent Address _____

City _____ State _____ Zip _____

Home Phone (including area code): (_____) _____ Cell phone (including area code): (_____) _____

College/Temporary Address _____

City _____ State _____ Zip _____

Please send all future written correspondence to my: Permanent Address College/Temporary Address

EDUCATION

Mark highest level completed: Some HS HS GED or diploma Associate Bachelor Master Doctoral

Current Class Standing (2009-10 school year) : Freshman Sophomore Junior Senior Not applicable

High School _____ City _____ State _____ Year of High School Graduation _____

College _____ City _____ State _____ Years attended _____

Date of College Graduation: _____ **or** Expected Date of Graduation if currently enrolled _____

Major(s) _____ Minor(s) _____

Degree(s) / Certifications Received _____

WORK EXPERIENCE Start with most recent. Include both paid and volunteer positions.

1. Company Name _____ Dates of Employment _____

Company Address _____ City _____ State _____ Zip _____

Job Title _____ Duties and accomplishments: _____

2. Company Name _____ Dates of Employment _____

Company Address _____ City _____ State _____ Zip _____

Job Title _____ Duties and accomplishments: _____

3. Company Name _____ Dates of Employment _____

Company Address _____ City _____ State _____ Zip _____

Job Title _____ Duties and accomplishments: _____

II. STAFF POSITIONS Complete position descriptions can be found online at www.camphomitakoda.com. Applicants must meet the age requirement before staff orientation and training begins in June 2010. Most positions require on-site availability for the entire length of camp. Time off will not be permitted for summer courses or other employment. Please check the position(s) you are applying for:

<p><u>Administrative</u></p> <p><input type="checkbox"/> Head Counselor</p> <p><input type="checkbox"/> Waterfront Manager Please attach copy of certifications.</p>	<p><u>Counseling and Program Staff</u></p> <p><input type="checkbox"/> Counselor</p> <p><input type="checkbox"/> Counselor /Secretary</p> <p><input type="checkbox"/> Program Specialist: Arts & Crafts</p> <p><input type="checkbox"/> Program Specialist: Archery</p> <p><input type="checkbox"/> Program Specialist: Challenge Course and Climbing Wall</p> <p><input type="checkbox"/> Program Specialist: Drama</p> <p><input type="checkbox"/> Program Specialist: Sports</p> <p><input type="checkbox"/> Lifeguard Please attach copy of certifications.</p>
<p><u>Kitchen</u></p> <p><input type="checkbox"/> Head Cook</p> <p><input type="checkbox"/> Cook</p> <p><input type="checkbox"/> Kitchen Assistant</p> <p><input type="checkbox"/> Dietetic Intern: Must be enrolled in accredited dietetic program. (<i>unpaid position</i>)</p>	<p><u>CIT and CIT/Lifeguard</u> (<i>unpaid positions</i>)</p> <p><input type="checkbox"/> Counselor in Training I: CIT I Must be at least 16 years of by June 10, 2009.</p> <p><input type="checkbox"/> Counselor in Training I/ Lifeguard Please attach copy of certifications.</p> <p><input type="checkbox"/> Counselor in Training II: CIT II Must be at least 17 years of age by June 10, 2009.</p> <p><input type="checkbox"/> Counselor in Training II/ Lifeguard Please attach copy of certifications.</p>
<p><u>Medical</u></p> <p><input type="checkbox"/> Camp Nurse, RN <input type="checkbox"/> Camp Nurse, LPN Must have current licensure in the State of Ohio. Please attach copy of license.</p> <p><input type="checkbox"/> Student Nurse Must be enrolled in accredited nursing program. (<i>unpaid position</i>)</p> <p><input type="checkbox"/> Medical Volunteer: Must have current RD, RN, LPN, MD, or DO licensure in the State of Ohio. Please attach copy of license.</p> <p>Medical Applicants: Please indicate which session(s) you are applying for:</p> <p><input type="checkbox"/> Session 1 <input type="checkbox"/> Session 2 <input type="checkbox"/> Session 3 <input type="checkbox"/> Session 4 <input type="checkbox"/> Session 5 <input type="checkbox"/> All sessions</p>	

<p>Do you meet or exceed any minimum age requirements for the position you are applying? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Can you perform the essential functions of the job for which you have applied, with or without reasonable accommodation? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
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III. PERSONAL ESSAY Please describe the skills and experience you offer to Camp Ho Mita Koda. Attach your typed responses to the following questions to your application. (If you were a paid employee during Type 1 residence camp in 2009, you do **not** need to complete this section).

1. Please describe in detail your background, skills, experience, and certifications related to the position you are applying for. Attach a separate sheet if necessary.
2. Do you have any special background in Type 1 Diabetes?
3. Describe your clinical background and experiences thus far. (Medical Applicants only)

IV. PROGRAM & ACTIVITY LEADERSHIP (This section does not apply to medical or kitchen positions)

Program Specialists, Lifeguards and Counselors will have leadership responsibilities for scheduled camp activities. To help us match your interests and qualifications with our activity needs, please complete the following section. Please indicate the activity(s) you feel you are qualified to plan and serve as a lead instructor with an **L**. Mark activities that you hold current certification in with a **C**. Mark activities you can assist with with an **A**. * indicates activities one must be 18 years of age to teach.

Sports	Arts & Crafts	Outdoor Skills and Nature	Drama, Dance and Music	Waterfront (certified lifeguards only)	Other
<input type="checkbox"/> Archery*	<input type="checkbox"/> Jewelry	<input type="checkbox"/> Hiking	<input type="checkbox"/> Acting class	<input type="checkbox"/> Swimming Lessons	<input type="checkbox"/> Indian Lore
<input type="checkbox"/> Challenge Course & Climbing Wall*	<input type="checkbox"/> Origami	<input type="checkbox"/> Overnight Camping	<input type="checkbox"/> Improv	<input type="checkbox"/> Water Aerobics	<input type="checkbox"/> Foreign Language (specify)
<input type="checkbox"/> Self-defense	<input type="checkbox"/> Ceramics	<input type="checkbox"/> Maps & Compass	<input type="checkbox"/> Piano	<input type="checkbox"/> Synchronized swimming	<input type="checkbox"/> Camp Newspaper
<input type="checkbox"/> Yoga	<input type="checkbox"/> Painting	<input type="checkbox"/> Knots	<input type="checkbox"/> Costuming	<input type="checkbox"/> Sailing	<input type="checkbox"/> Cooking
<input type="checkbox"/> Volleyball	<input type="checkbox"/> Drawing	<input type="checkbox"/> Fishing	<input type="checkbox"/> Singing	<input type="checkbox"/> Canoeing	<input type="checkbox"/> Evening Programs
<input type="checkbox"/> Pilates	<input type="checkbox"/> Cartooning	<input type="checkbox"/> Nature appreciation	<input type="checkbox"/> Play directing	<input type="checkbox"/> Rowing	<input type="checkbox"/> Photography
<input type="checkbox"/> Basketball	<input type="checkbox"/> Nature Crafts	<input type="checkbox"/> Astronomy	<input type="checkbox"/> Song leading	<input type="checkbox"/> Water Safety	<input type="checkbox"/> Office Skills
<input type="checkbox"/> Floor Hockey	<input type="checkbox"/> Papier-mâché	<input type="checkbox"/> Geology	<input type="checkbox"/> Instrument (specify)	<input type="checkbox"/> Kayaking	<input type="checkbox"/> Typing
<input type="checkbox"/> Ping pong	<input type="checkbox"/> Wool/Felt	<input type="checkbox"/> Pioneering	<input type="checkbox"/> Dance (specify classical, popular, folk, line,. etc).	<input type="checkbox"/> *Life Saving	<input type="checkbox"/> Bookkeeping
<input type="checkbox"/> Tennis	<input type="checkbox"/> Woodwork	<input type="checkbox"/> Campfire		<input type="checkbox"/> *CPR	<input type="checkbox"/> Microsoft Word
<input type="checkbox"/> Group Games	<input type="checkbox"/> Carving	<input type="checkbox"/> Outdoor Cooking		<input type="checkbox"/> *First Aid	<input type="checkbox"/> Internet
<input type="checkbox"/> Golf	<input type="checkbox"/> Other (specify)	<input type="checkbox"/> Gardening		<input type="checkbox"/> Fishing	<input type="checkbox"/> Excel
<input type="checkbox"/> Softball		<input type="checkbox"/> Other (specify)		<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> Lacrosse				<input type="checkbox"/> Water Sports (specify)	
<input type="checkbox"/> Aerobics & Dance					
<input type="checkbox"/> Soccer					
<input type="checkbox"/> Flag football	<input type="checkbox"/> Field Games				

List other areas you are qualified to teach:

V. LIFEGUARDS ONLY (please attach copies of certifications to your application. Applications without proper documentation will be considered incomplete)

1. Do you have a life guarding certification that is current through August 2010? YES NO
2. Do you have a CPR certification that is current through August 2010? YES NO
3. Do you have a Small Craft Safety certification that is current through August 2010? YES NO
4. Do you have a Water Safety Instructor (WSI) certification that is current through August 2010? YES NO
5. Do you have any boating instructor certifications that are current through August 2010? YES NO

Please list _____

6. Do you have a pool operator's certification or related training? YES NO

Please describe _____

7. Do you have any previous waterfront management experience, including small crafts? YES NO

Please describe _____

8. If any certification(s) expire before August 2010, when will it be renewed? _____

VI. PROFESSIONAL REFERENCES (professional references: work supervisor, coach, professor, etc)

Applicants must submit two Camp HMK reference forms in signed, sealed envelopes with their application. Reference forms can be downloaded from the camp website: <http://www.camphomitakoda.com>. Applications will not be considered until references have been received. (If you were a paid employee during Type 1 residence camp in 2009, you do **not** need to complete this section).

VII. HARASSMENT

Camp Ho Mita Koda's policy is to prohibit all forms of harassment by our employees. This includes sexual, racial, religious, and other forms of harassment. Have you ever been accused of harassment of any person including, but not limited to, workplace harassment? (note: a prior accusation is not an automatic bar to employment. The type of accusation and when it occurred will be evaluated by the Camp before a decision is made). YES NO

VI. DISCLAIMER STATEMENT I assert that I have never been convicted of any crime or misdemeanor involving inappropriate conduct with children, the use or sale of controlled substances, and have never been convicted of any crime other than minor traffic violations.

I understand that working with children is a significant part of working at Camp Ho Mita Koda and that a criminal background check and a check of the National Sex Offender Public Registry will be required if I am offered a position.

Camp Ho Mita Koda is an equal opportunity employer. We do not discriminate on the basis of race, color, religion, age, gender, national origin, or non- disqualifying disability. Equal access to programs, services, and employment is available to all persons. Those applicants requiring accommodation to the application and/or interview process should notify the Camp's Executive Director.

I verify that the information provided above and in my application materials is complete, true, and accurate. I understand that false or fraudulent information on or attached to this application may be grounds for not hiring me or firing me after I begin work.

_____ (your signature) _____/_____/_____ (date)